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PTO/SB/01 (08-03)

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	6319-3000
First Named Inventor	AN
<i>COMPLETE IF KNOWN</i>	
Application Number	10/826,439
Filing Date	April 15, 2004
Art Unit	1624
Examiner Name	(TBA)

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

QUINOXALINE DERIVATIVES HAVING ANTIVIRAL ACTIVITY

(Title of the Invention)

the specification of which

is attached hereto

OR APRIL 15, 2004 as United States Application Number or PCT International

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as
and was amended on (MM/DD/YYYY) (if applicable).

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the filing date of this application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date less than the filing date of the application on which priority is claimed.

Priority Claimed Before First Filing in U.S. (Check All That Apply)				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
	US		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 8]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number: 29858 OR Correspondence address below

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Address

City

State

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:



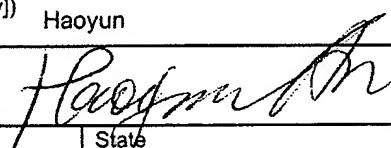
A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Haoyun

Family Name
or Surname

AN

Inventor's
Signature

Date

8/17/04

Residence: City
CarlsbadState
CACountry
USCitizenship
US

Mailing Address

Ribapharm Inc., 3300 Hyland Avenue

City
Costa MesaState
CAZIP
92626Country
US

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Frank

Family Name
or Surname

RONG

Inventor's
Signature

Date

Residence: City
IrvineState
CACountry
USCitizenship
US

Mailing Address

Ribapharm Inc., 3300 Hyland Avenue

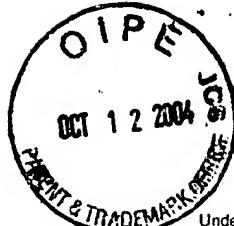
City
Costa MesaState
CAZIP
92626Country
US

Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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DECLARATION — Utility or Design Patent Application

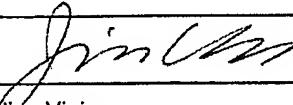
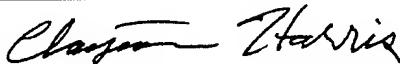
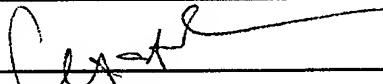
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 29858 OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	
Country		ZIP	
Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Haoyun		Family Name or Surname AN	
Inventor's Signature			Date
Residence: City Carlsbad	State CA	Country US	Citizenship US
Mailing Address Ribapharm Inc., 3300 Hyland Avenue			
City Costa Mesa	State CA	ZIP 92626	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Frank		Family Name or Surname RONG	
Inventor's Signature <i>Frank Rong</i>			Date 08/31/04
Residence: City Irvine	State CA	Country US	Citizenship US
Mailing Address Ribapharm Inc., 3300 Hyland Avenue			
City Costa Mesa	State CA	ZIP 92626	Country US
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			



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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental SheetPage 1 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)		Family Name or Surname		
Jim		Wu		
Inventor's Signature				Date 9/11/2004
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Mailing Address	Ribapharm Inc.			
Mailing Address	3300 Hyland Avenue			
City	Costa Mesa	State	CA	Zip 92626
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)		Family Name or Surname		
Clayton		Harris		
Inventor's Signature				Date 8-31-04
Residence: City	Irvine	State	CA	Country US
Mailing Address	Ribapharm Inc.			
Mailing Address	3300 Hyland Avenue			
City	Costa Mesa	State	CA	Zip 92626
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)		Family Name or Surname		
Sueting		Chow		
Inventor's Signature				Date 8/31/2004
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Mailing Address	Ribapharm Inc.			
Mailing Address	3300 Hyland Avenue			
City	Costa Mesa	State	CA	Zip 92626

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